

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

10/797 492

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | minus 20 = | |
| INDEPENDENT CLAIMS | minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

| SMALL ENTITY TYPE | OTHER THAN OR SMALL ENTITY |
|-------------------|----------------------------|
| RATE | FEES |
| BASIC FEE | 150.00 |
| X\$ 25= | |
| X100= | |
| +180= | |
| TOTAL | OR TOTAL |

If the difference in column 1 is less than zero, enter "0" in column 2

4/7/06 CLAIMS AS AMENDED - PART II

| AMENDMENT | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------|------------------------------------|
| A. NE | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | 23 | Minus | 24 = — |
| Independent | 3 | Minus | 3 = — |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| SMALL ENTITY | OTHER THAN SMALL ENTITY |
|------------------|-------------------------|
| RATE | ADDITIONAL FEE |
| X\$ 25= | |
| X100= | |
| +180= | |
| TOTAL ADDIT. FEE | OR TOTAL ADDIT. FEE |

| AMENDMENT | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------|------------------------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | Minus | = | PRESENT EXTRA |
| Independent | Minus | = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|------------------|---------------------|
| X\$ 25= | |
| X100= | |
| +180= | |
| TOTAL ADDIT. FEE | OR TOTAL ADDIT. FEE |

| AMENDMENT | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------|------------------------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | Minus | = | PRESENT EXTRA |
| Independent | Minus | = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|----------|----------------|
| X\$ 25= | |
| X100= | |
| +180= | |
| OR +360= | |